-	Please type a plus sign (+) inside this box →
	Under the Paperwork Reduction Act of 1995, nevers
S	
	NEW UTILITY PATER
2=:"	APPLICATION TRANSM

Approved for use through 9/30/98 - OMB 0651 0032
Patent and Trademark Office - U.S. DEPARTMENT OF COMMERCA
prisons are required to respond to a collection of informative - Pless it displays a valid OMB control number

NEW UTILITY PATENT APPLICATION TRANSMITTAL

(to be used for new applications only)

Attorney Docket Number	1		
irst Named Inventor	<u> </u>		SHUKLA
otal Pages in this Submission	Text /	6 Pa	zes

APPLICATION ELEMENTS Notice: Checklist items mentioned under Application Elements section construct a new utility patent application. Please refer to MPEP Sections 506, 601, (37CFR 1.77, 1.53, 35 USC 111, 112, 113) for detailed explanation regarding completeness of an original patent application.			ACCO	MPANYING A	APPLICATION PA	29 T. 28 S.		
ر ک	Transmittal Form (prescribed filing fee	e(s))	6.	Assignment Pap	ers	5910 1	
2. Specification Title	of the Invention				Certified Copy of (if foreign priority	Priority Document(s) is claimed)	Jes38	
	s References to R plicable)	elated Applications	i.	8				
State Rese	ment Regarding F arch/Developmen	ederally-sponsored t <i>(if applicable)</i>	t	9.	English Translati	ion Document (if applic	able)	
1 1	rence to Microficho olicable)	e Appendix			Information Disc Statement/PTO-			
Back	ground of the Inve	ention	•	11	Petition Checklis	t and Accompanying P	etition	
Brief	Summary of the I	nvention		12.	Preliminary Ame	ndment		
	Description of the awings filed)	Drawings		13. Proprietary Information				
Detai	Detailed Description			14. Return Receipt Postcard				
Clain	n or Claims			15. Small Entity Statement				
Abstr	act of the Disclosi	nte ·		16. Additional Enclosures (please identify below):				
3. Draw 35 Us	ing(s) <i>(when nece</i> SC 113)	essary as prescribed	d by					
4. Execu	uted Declaration							
•	uence Submission			SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Paper Copy			Firm or Individual name ASHOK K. SHUKLA			KLA		
Computer Readable Copy			Signature					
Statement Verifying Identical Paper and Computer Readable Copy			Date 6/7/00					
		FOR OFFI	CIAL U	SE ONLY				
Application Number			Class	···		Independent Claims	5	
Date of Receipt	Date of Receipt Application Type GAU				Total Claims			
Filing Date Foreign		Filing License?		Drawing Sheets				
	Small Entity		Foreign	Address?		Special Handling?		

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Onder the Paperwore Reduction Act of 1990.	Completed Known					
*		PI NOW	<u></u>			
1	Application Number					
FEE TRANSMITTAL	Filing Date	6/7/00				
FEE INAMOMITIAL	First Named Inventor	ASHOIC	K.	SHUKLA		
	Group Art Unit					
	Examiner Name					
TOTAL AMOUNT OF PAYMENT (\$)	Attorney Docket Number					

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	3. ADDITIONAL FEES Large Entity Small Entity					
Deposit Account	Fee Fee Fee Fee Code (\$) Fee Description	Fee Paid				
Number	105 130 205 65 Surcharge - late filling fee or oath					
Deposit Account Name	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.					
Charge Any Additional Charge the Issue Fee Sat in 37 CFR 1.18 at the Making of the	139 130 139 130 Non-English specification					
CFR 1.16 and 1.17 Notice of Allowance, 37 CFR	147 2,460 147 2,460 For filing a request for reexamination					
2. Payment Enclosed:	112 900' 112 900' Requesting publication of SIR prior to Examiner action					
Check Money Other	113 1,790' 113 1,790' Requesting publication of SIR after Examiner action					
FEE CALCULATION (fees effective 10/01/96)	115 110 215 55 Extension for response within first month					
1. FILING FEE	116 390 216 195 Extension for response within second month					
	117 930 217 465 Extension for response within third month					
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	118 1,470 218 735 Extension for response within fourth month					
Code (\$) Code (\$)	119 300 219 150 Notice of Appeal					
101 770 201 385 Utility filing fee 3 4 5	120 300 220 150 Filing a brief in support of an appeal					
106 320 206 160 Design filing fee	121 260 221 130 Request for oral hearing					
107 530 207 265 Plant filing fee	138 1,470 138 1,470 Petition to institute a public use proceeding					
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive unavoidably abandoned application					
SUBTOTAL (1) (\$)	141 1,290 241 545 Petition to revive unintentionally abandoned application					
O OLAMA Fee from	142 1,290 242 645 Utility issue fee (or reissue)					
2. CLAIMS Extra below Fee Paid	143 440 243 220 Design issue fee					
Total Claims -20 = X =	144 650 244 325 Plant issue fee					
Claims	122 130 122 130 Petitions to the Commissioner					
Multiple Dependent Claims X	123 50 123 50 Petitions related to provisional applications					
Large Entity Small Entity	126 230 126 230 Submission of Information Disclosure Stmt					
Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)					
103 22 203 11 Claims in excess of 20	146 770 246 385 Filing a submission after final rejection	1				
102 80 202 40 Independent claims in excess of 3	(37 CFR 1.129(a))					
104 260 204 130 Multiple dependent claim	149 770 249 385 For each additional invention to be examined (37 CFR 1.129(b))					
109 80 209 40 Reissue independent claims over original patent	· · · · · · · · · · · · · · · · · · ·					
110 22 210 11 Reissue claims in excess of 20	Other fee (specify)					
and over original patent	Other fee (specify)					
SUBTOTAL (2) (\$) 24 5.	Reduced by Basic Filing Fee Paid SUBTOTAL (3)					
CURAINTER DV						

SUBMITTED BY					Complete (if applicable)		
Typed or Printed Name	ASHOK	K	SHUKL	A		Reg. Number	
Signature	0 X	سب		Date	617100	Deposit Account User ID	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Certificate of Mailing under 37 CFR 1.8



I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

> Assistant Commissioner for Patents Washington, D.C. 20231

on 6/7/00

Signature

SHUKLA AS HOZ

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing.

TITLE .

INCISION BASED FILTRATION SEPARATION
PIPETTE TIP

Invers: Ashor K SHUKLA, et al.
New application

This Page is Inserted by IFW Indexing and Scanning Operations and is not part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

BLACK BORDERS

IMAGE CUT OFF AT TOP, BOTTOM OR SIDES

FADED TEXT OR DRAWING

BLURRED OR ILLEGIBLE TEXT OR DRAWING

SKEWED/SLANTED IMAGES

COLOR OR BLACK AND WHITE PHOTOGRAPHS

GRAY SCALE DOCUMENTS

LINES OR MARKS ON ORIGINAL DOCUMENT

REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY

OTHER:

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.